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APPLICANTS

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**** CONTINUING DATA** *No*

No

**** FOREIGN APPLICATIONS** *****

**IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 04/03/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>mlm</i>	Examiner's Signature	Initials		

ADDRESS

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TITLE

Multiple channel joint decoding at mobile handset

FILING FEE RECEIVED 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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